

# CERTIFICATION FOR IDAHO'S ADMINISTRATIVE FACILITIES TAX INCENTIVES

FORM 89C  
EF000007  
10-26-05\_v5

Business name	Federal employer identification number
Business mailing address	Contact person and title
City, state and zip code	Telephone number of contact person

**Type of incentive qualifying for (check only one box).** See instructions for more information on the tax incentive criteria that must be met to qualify.

- Incentive allowed by Idaho Corporate Headquarters Incentive Act of 2005** — capital investment in new headquarters or administrative facilities of at least \$50 million at the project site, and increased employment at the project site by at least 500 new employees.
- Incentive allowed by Idaho Small Employer Incentive Act of 2005** — capital investment in new headquarters or administrative facilities of at least \$500,000 at the project site, increased employment at the project site by at least ten new employees, increased employment of at least one new employee for each \$50,000 invested in new headquarters or administrative facilities..

The following information is required to certify that the proposed project will meet the tax incentive criteria during the project period. Failure to provide the requested information may result in the Tax Commission denying any tax incentives claimed under the Idaho Corporate Headquarters Incentive Act of 2005 or the Idaho Small Employer Incentive Act of 2005.

**1. Description of qualifying project**

---

---

---

**2. Estimated/actual start date of project.** The start date is the earlier of the date the first physical change to the project site is scheduled to occur or the date new employees related to the project site will be first employed in Idaho. The start date cannot be earlier than January 1, 2005.

---

---

**3. Estimated/actual end date of project.** This cannot be later than December 31, 2009.

---

---

**4. Location of the project site(s).** Identify the street address for each site. If more than one location, identify the percent of the investment projected at each site once the project is completed.

---

---

---

**5. If claiming the incentives under the Corporate Headquarters Incentive act, is this the location of the company's national or regional headquarters?**

Yes \_\_\_\_\_ No \_\_\_\_\_ If no, please explain.

---

---

**6. Estimated/actual percent of company's administrative services handled at the project site(s) \_\_\_\_\_ %**

**7. Estimated/actual number of new administrative jobs created during the project period**

2005 \_\_\_\_\_ 2006 \_\_\_\_\_ 2007 \_\_\_\_\_

2008 \_\_\_\_\_ 2009 \_\_\_\_\_ TOTAL \_\_\_\_\_

**8. Estimated/actual cost of capital investments in new administrative facilities.** For each year in the project period, list the actual or projected cost of capital investments in new administrative facilities.

- a. **Qualified investment.** This is property that generally qualifies for the Idaho investment tax credit, including computers, equipment, furniture, etc.

2005 \_\_\_\_\_ 2006 \_\_\_\_\_ 2007 \_\_\_\_\_

2008 \_\_\_\_\_ 2009 \_\_\_\_\_ TOTAL \_\_\_\_\_

- b. **Buildings and their structural components, including parking garages**

2005 \_\_\_\_\_ 2006 \_\_\_\_\_ 2007 \_\_\_\_\_

2008 \_\_\_\_\_ 2009 \_\_\_\_\_ TOTAL \_\_\_\_\_

**9. Total administrative facilities cost by location**

---

---

---

**CERTIFICATION BY TAXPAYER**

Under penalties of perjury, I declare that to the best of my knowledge and belief this information is true, correct and complete.

Signature of officer	Date
Title	Phone number of officer

Mail to: TAX POLICY  
IDAHO STATE TAX COMMISSION  
PO BOX 36  
BOISE ID 83722

or

Fax to: TAX POLICY  
(208) 334-7844